HARI T COUNTY HEALTH DEPARTM

Nº19768

IMPROVEMENT PERMIT

03-5-5531 Be it ordained by the Harnett County Board of Health as follows: Section III, Item B. "No Person shall begin construction of any building at which a septic tank system is to be used for disposal of sewage without first obtaining a written permit

from the Harnett County Health Department."	
Name: (owner) Danny Morris	New Installation Septic Tank
Property Location: SR#	
Subdivision _ CRESTUREW	Lot #_ 35
Tax ID #	Quadrant #
Number of Bedrooms Proposed: 3 (Yo x 6 =	Lot Size: • 35 AC
Basement with Plumbing: Gar	rage:
	mmunity
Distance From Well: ft.	
iinai approvai.	isposal system on above captioned property. Subject to
Type of system: Conventional Oth	
Size of tank: Septic Tank: gallons	
Subsurface No. of exact length of each ditch	75 ft. ditches 3 ft. depth of 1835 in.
French Drain Required: Linear fee	
	Date: 10-27-02
This permit is subject to revocation if site plans or intended use change.	Signed: go when
	Environmental Health Specialist
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3 Table 2 # 31 5 A 12875 153	STANT Linet 30" Rento 18"
- (11. Box 30-31	JAMA LIMAT 33 TECA 13 18
Phone	18-35" P.til Drich,
Gand Olumba Challow	

I VETT COUNTY HEALTH DEPARTMI AU MORIZATION TO CONSTRUCT

Authorization is hereby given to Harnett County Health Departm authorization shall be valid for a This authorization will be invalid	ent, Improvement period not to exce	Permit # 1 / 9 8 ed five (5) years from the d	. This	
Danz Nous		892 — 4347 Telephone #		
Name 0				
Address				
1115		out the same hands and the same		
Property Location SR#		Road Nam	ie –	
Chestrica	35	3(40x62	.35	
Subdivision	Lot #	# Bedrooms Proposed	Lot size	
	TYPE OF S	YSTEM		
New Installation [] Repair	- Sepur Tank [/]	Attrincation Lines		
[] Basement [] With Plun	nbing [] Without Pl	lumbing		
Water Supply: [] Well Public Septic Tank NITE	Pump Cl	etback:Ft. namber D SPECIFICATIONS		
Number of fields# of line	s per field	_Length of lines 70	Ft.	
Width of ditches ft. Dep	th of ditches	inches		
French Drain: Linear feet required	Depth of	f gravel		
No wastewater system sha inspection by the Harnett Co	ounty Health De	partment has determin	ed that the system	
has been installed according	g to the conditio	ns of the Improvement ait has been issued.	Permit and that a	
Signature of Authorized Agent for Harnett	y	10.22.5~		